



Mangialardi, G., Ferland-McCollough, D., Maselli, D., Santopaolo, M., Cordaro, A., Spinetti, G., Sambataro, M., Sullivan, N., Blom, A., & Madeddu, P. (2019). Bone marrow pericyte dysfunction in individuals with type 2 diabetes. *Diabetologia*, 62(7), 1275-1290.
<https://doi.org/10.1007/s00125-019-4865-6>

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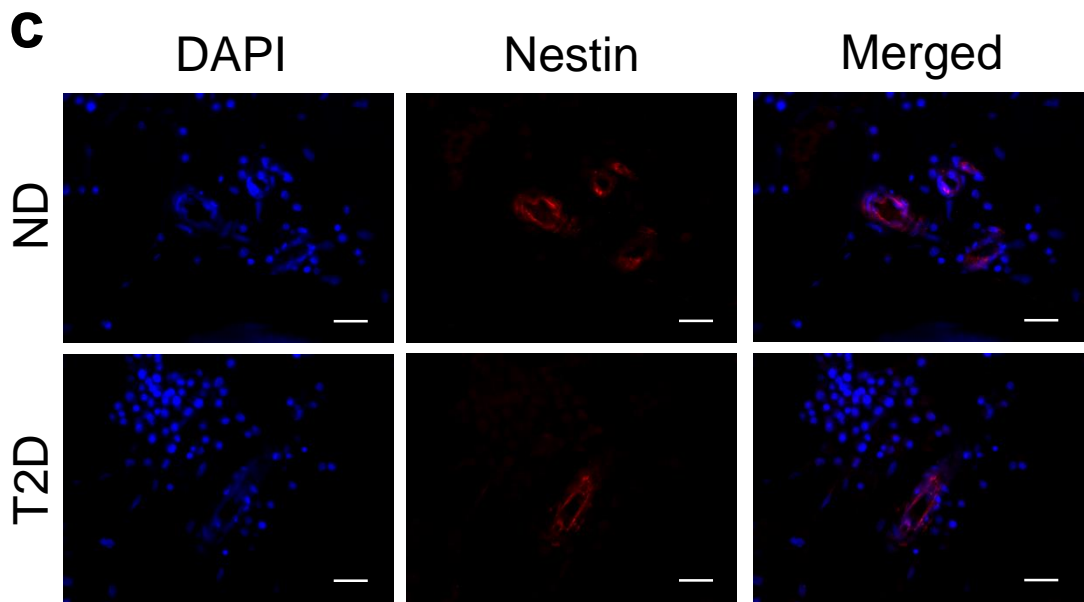
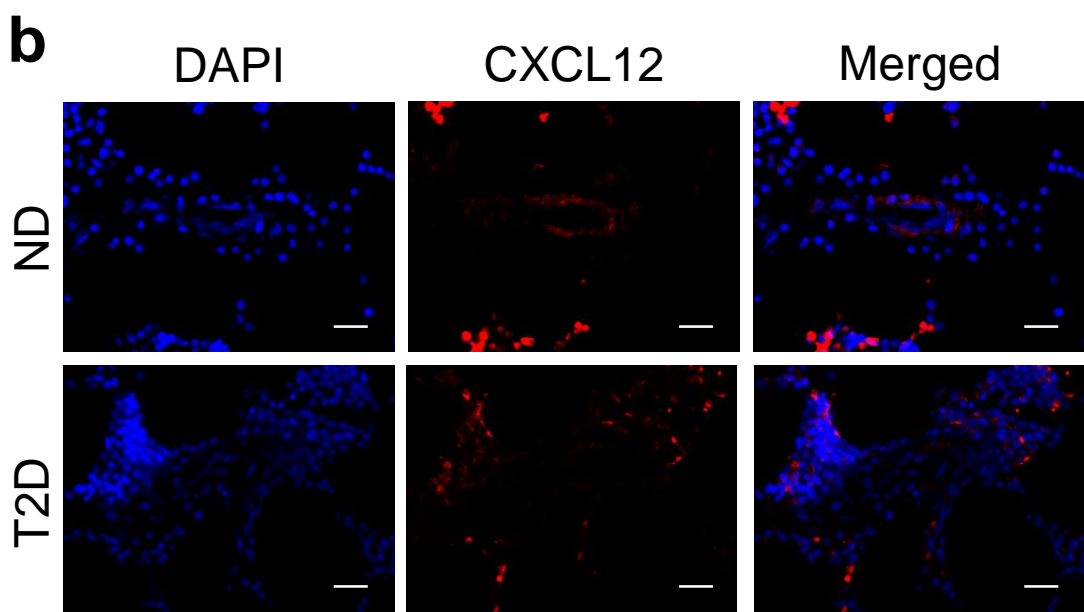
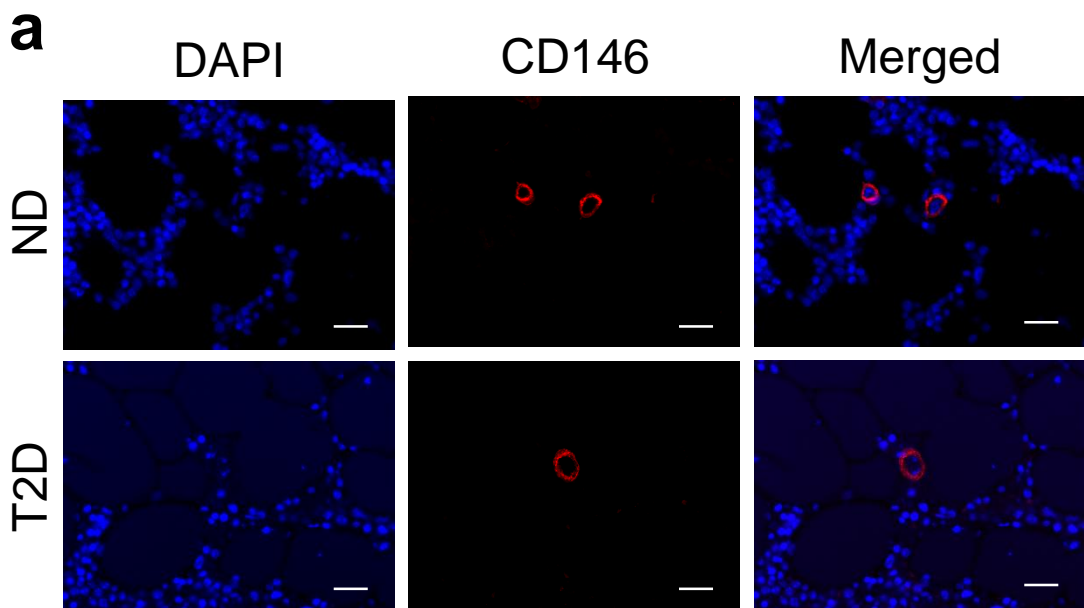
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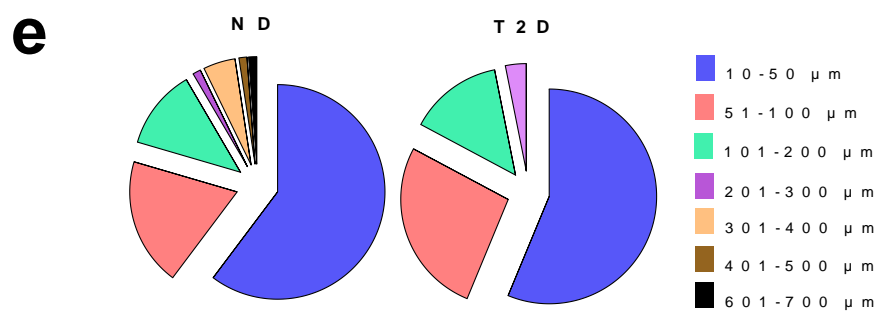
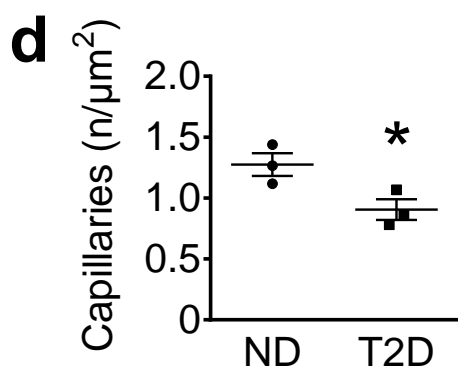
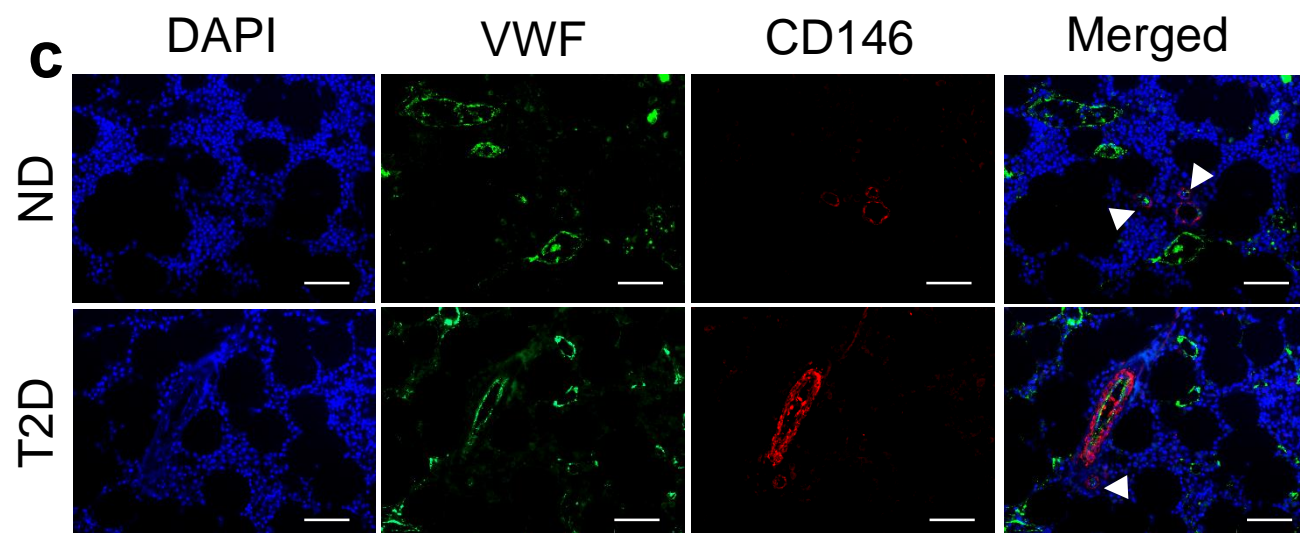
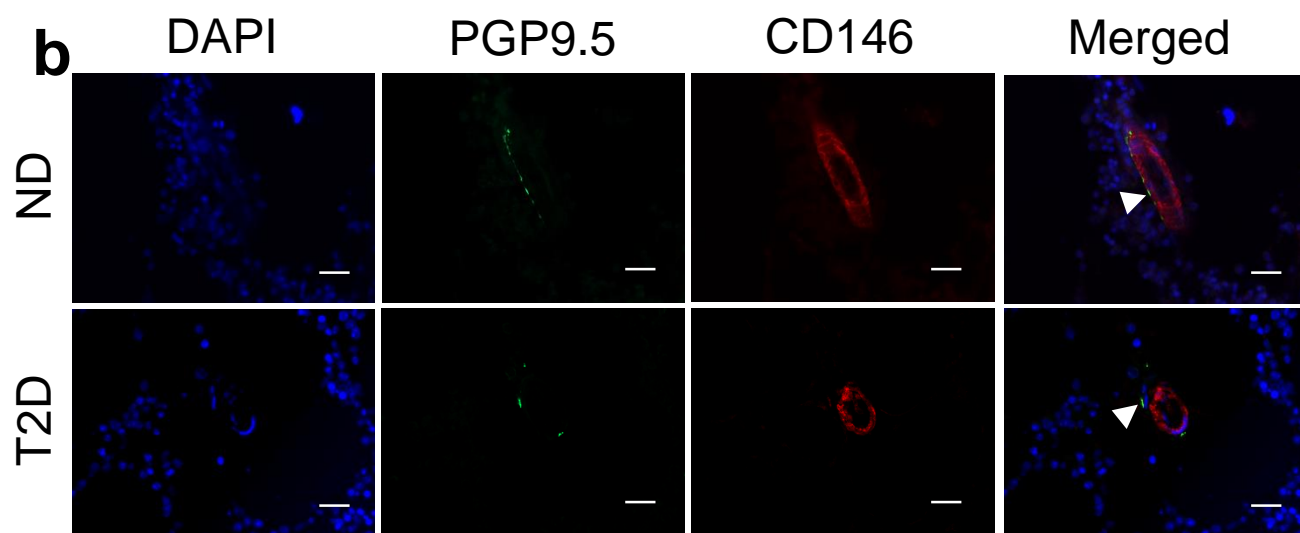
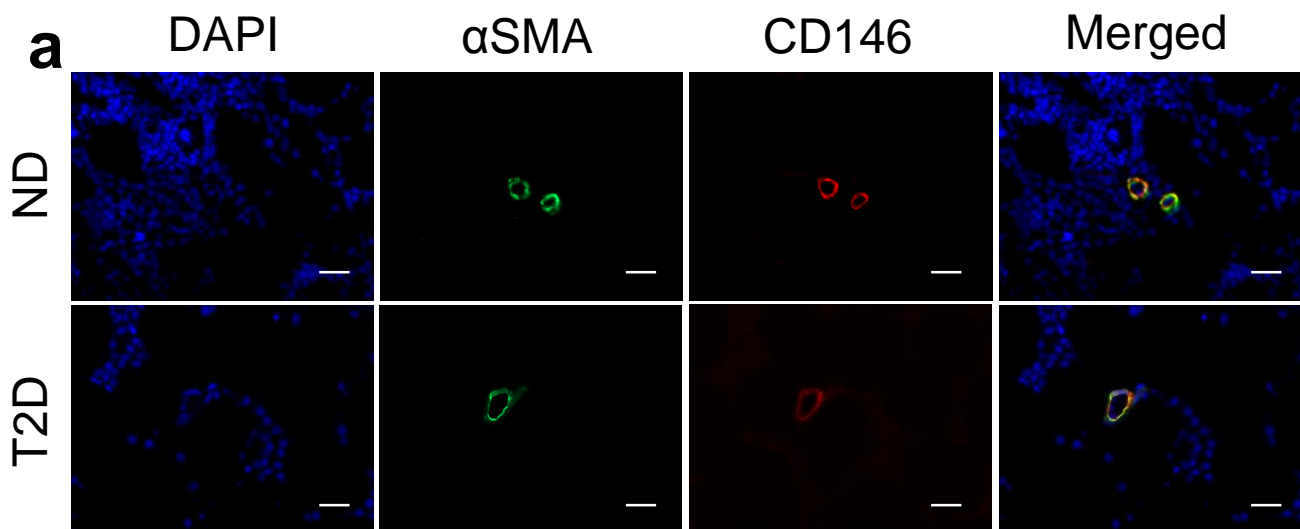
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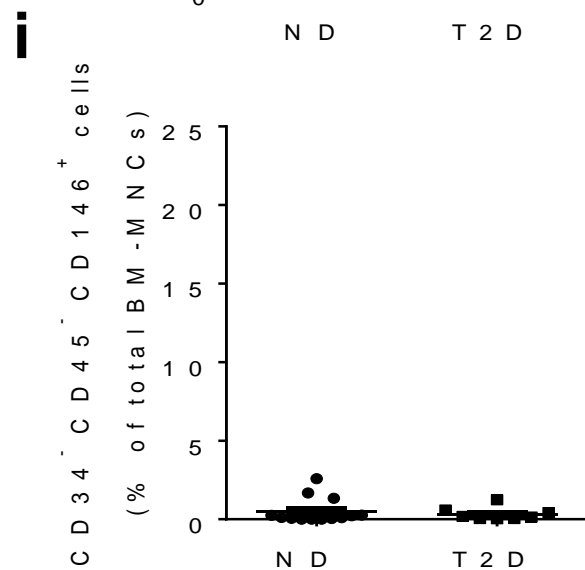
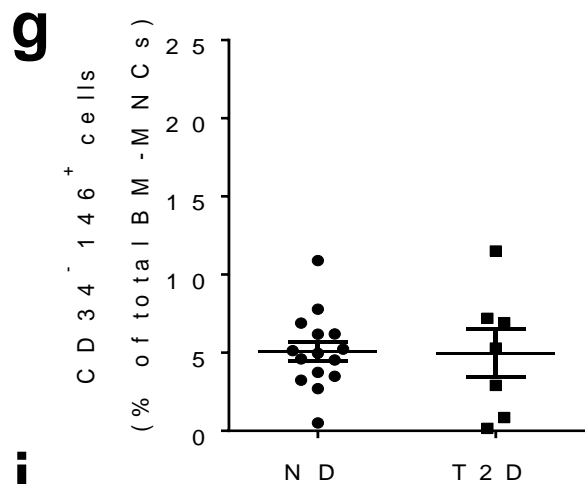
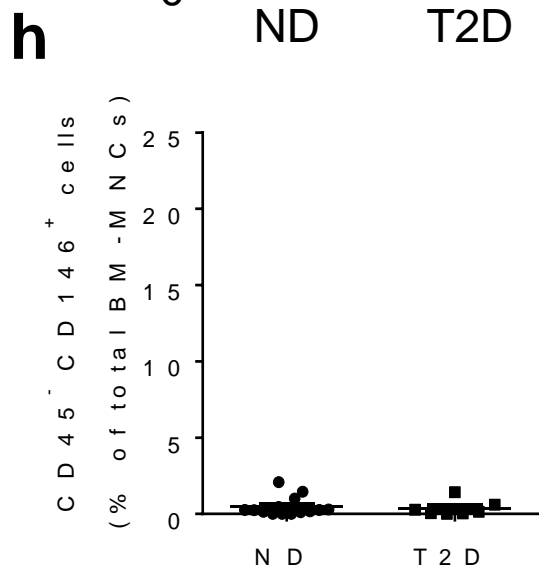
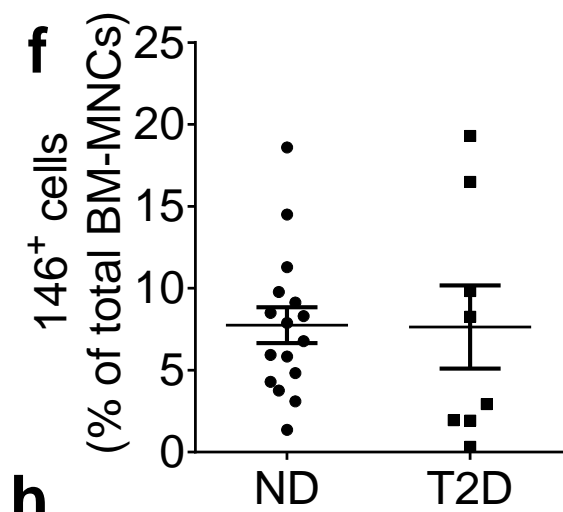
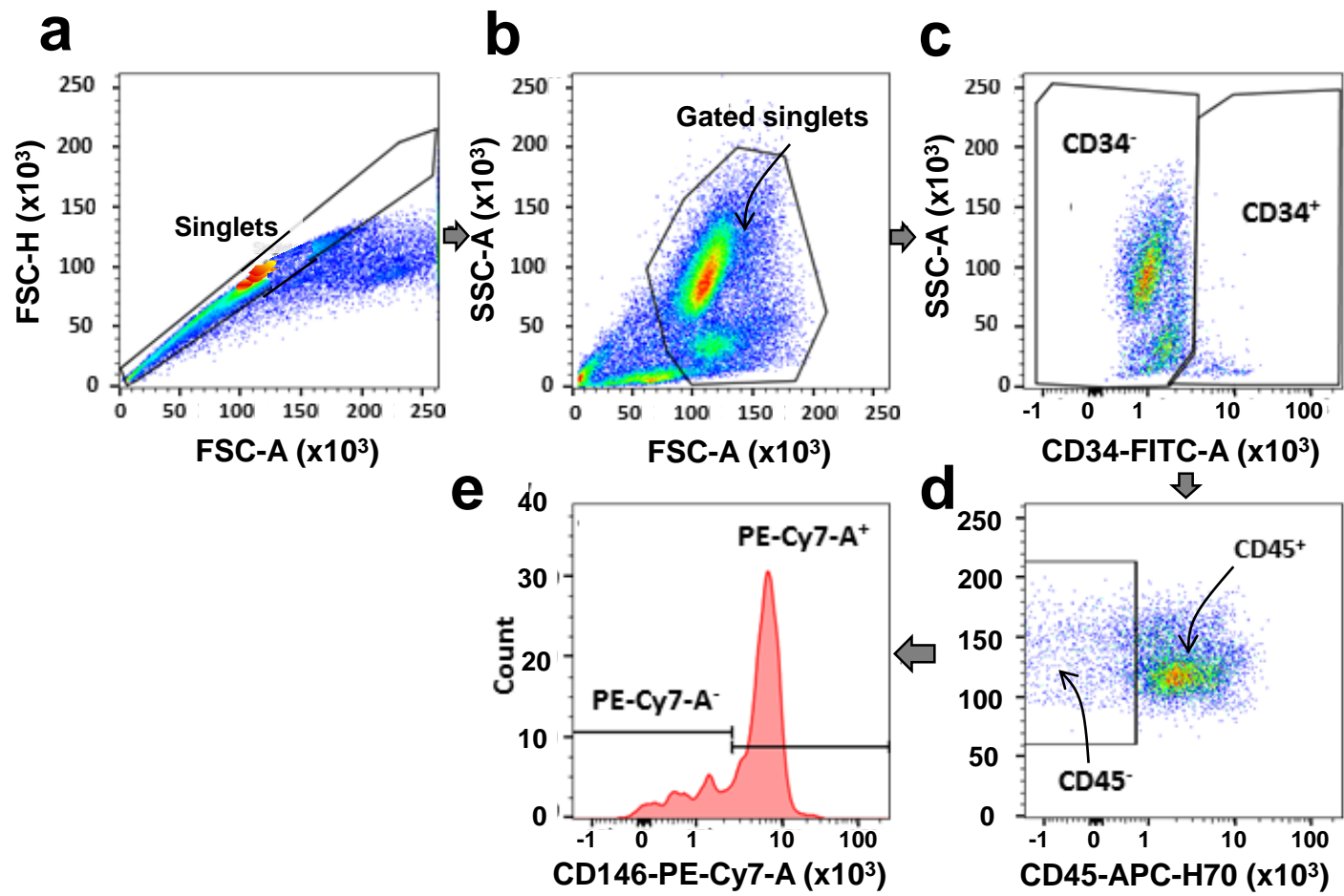
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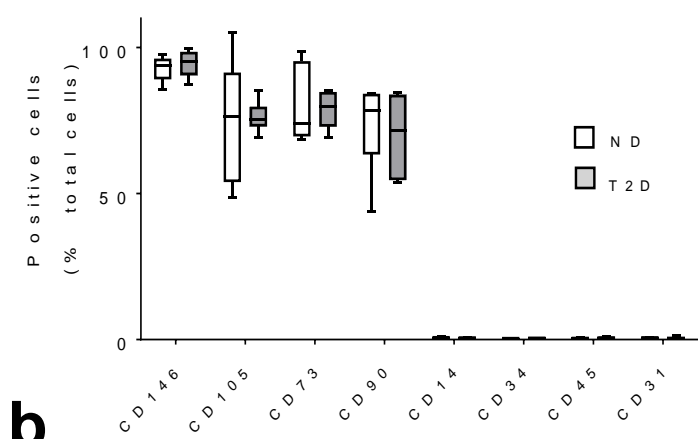
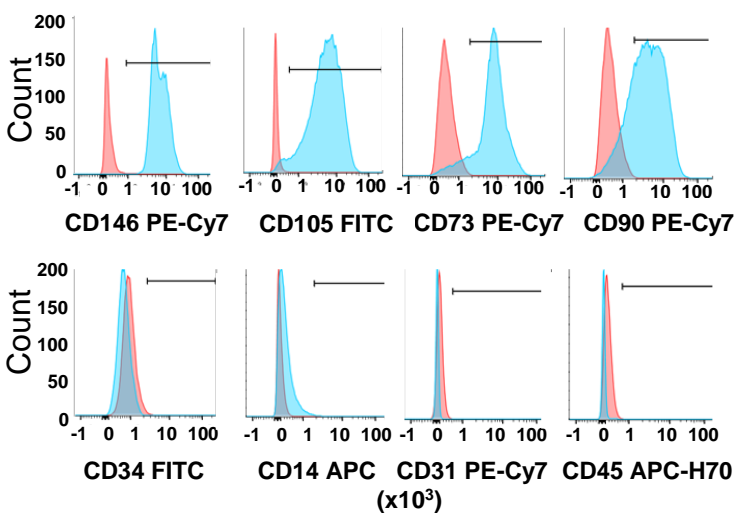
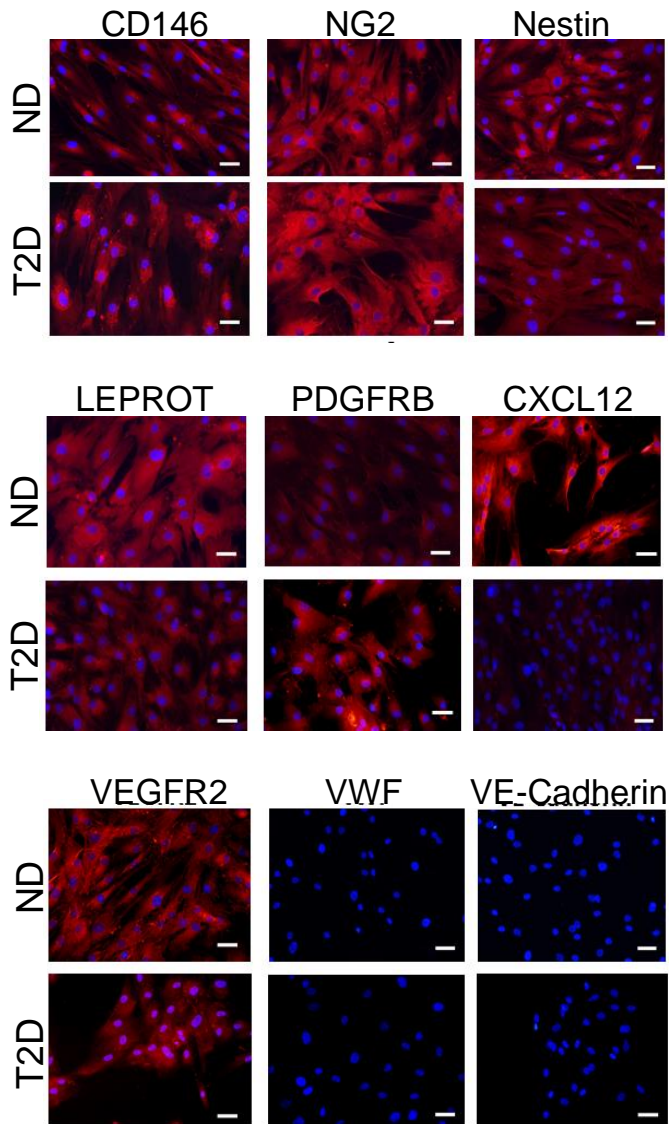
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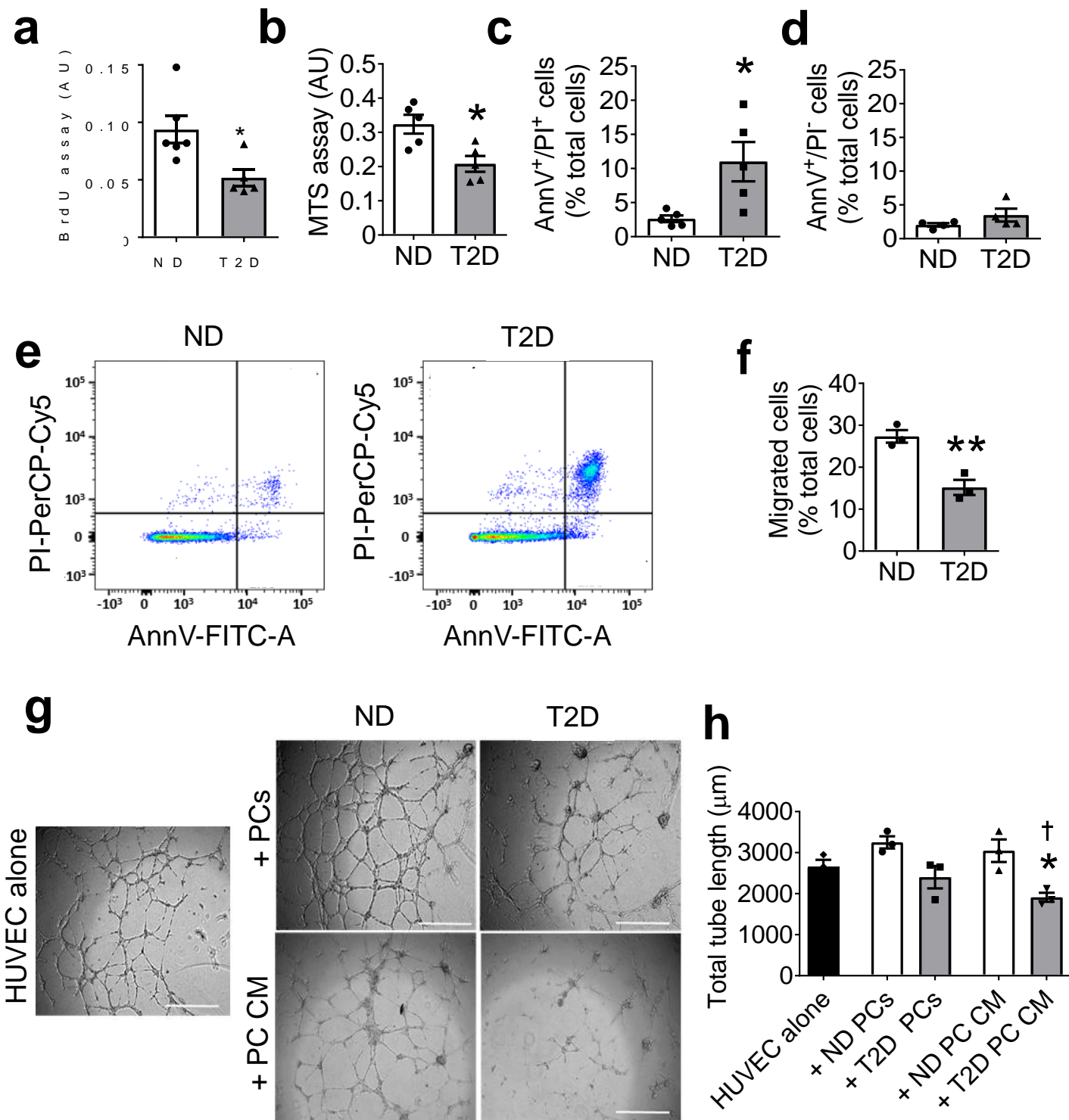
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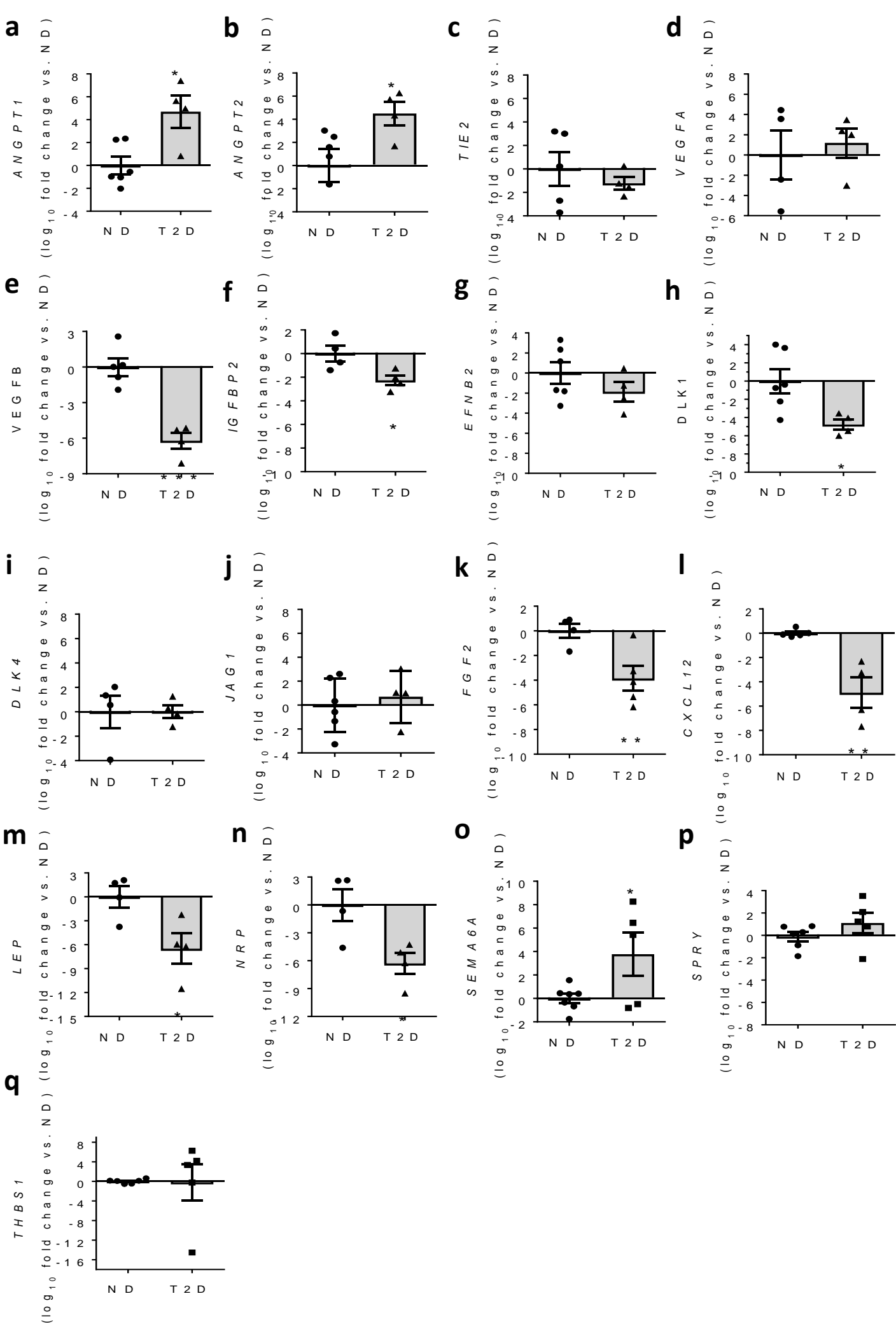


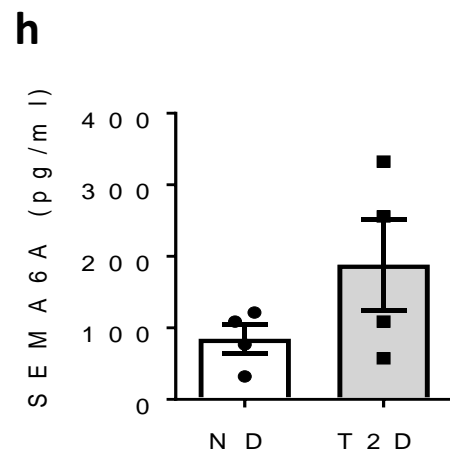
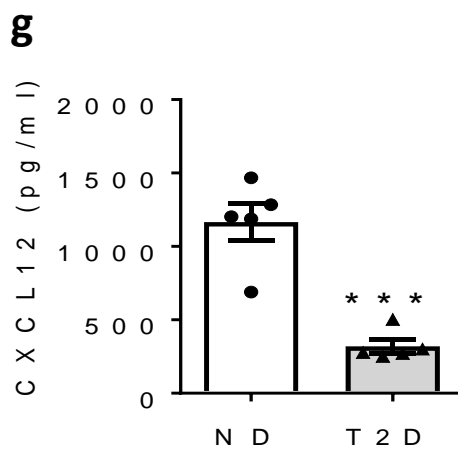
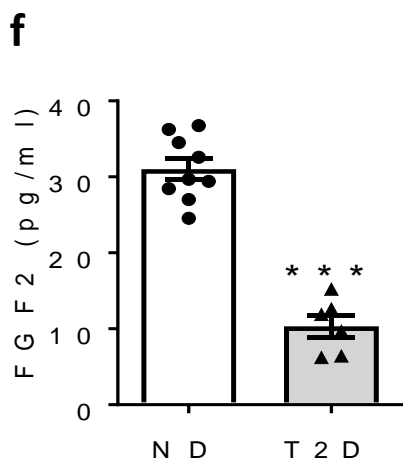
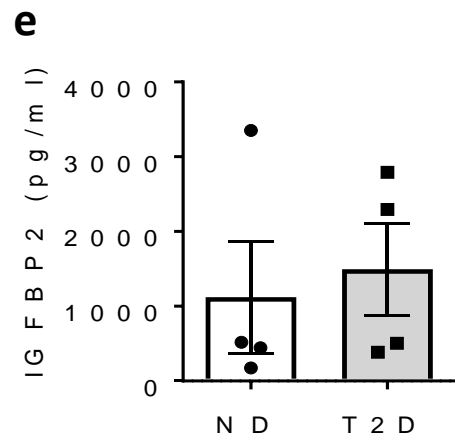
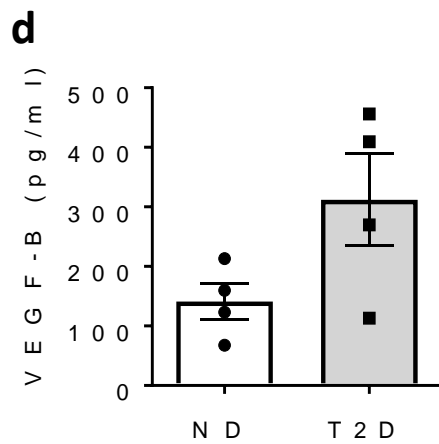
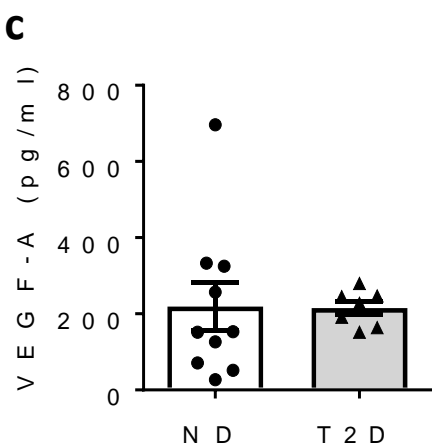
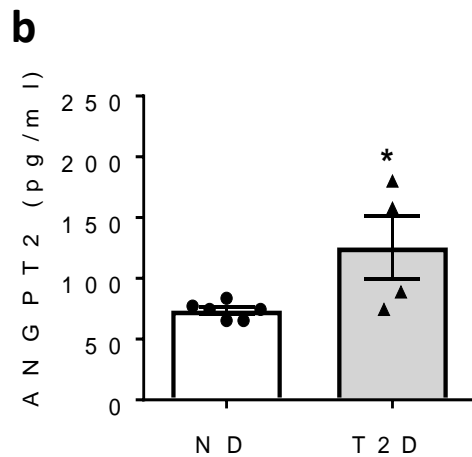
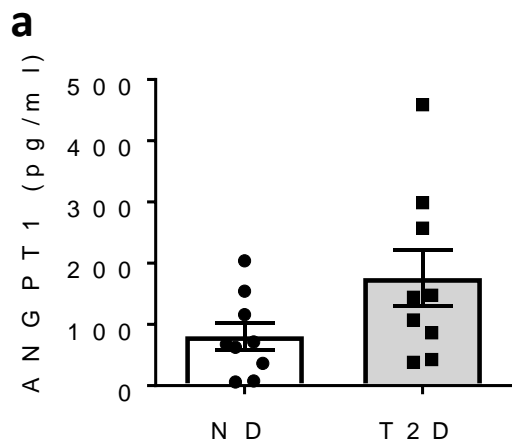


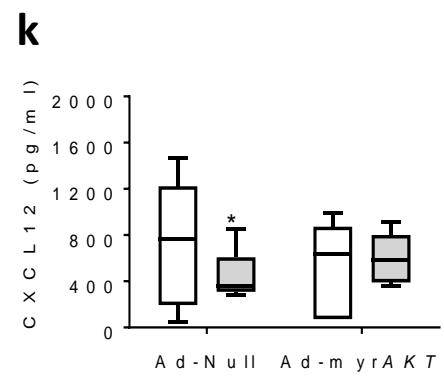
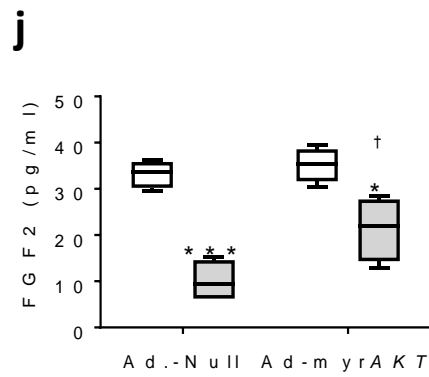
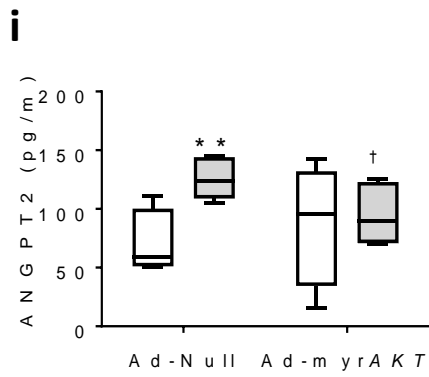
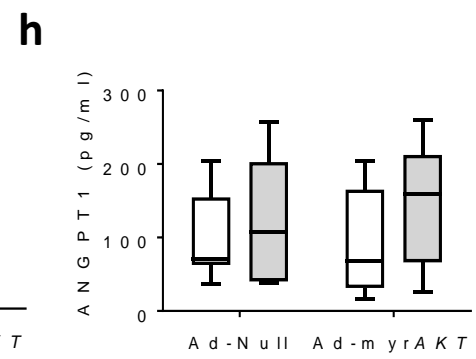
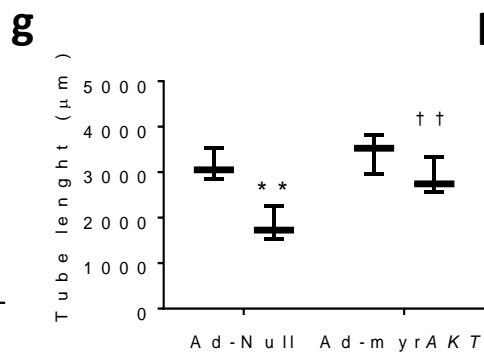
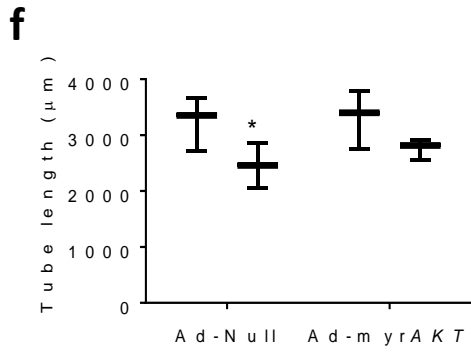
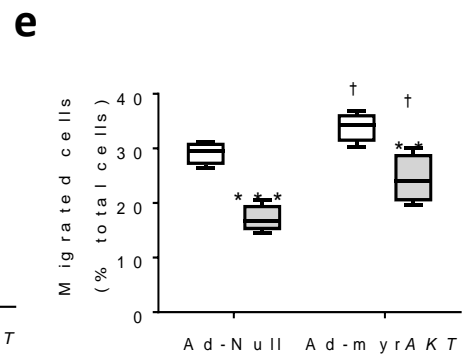
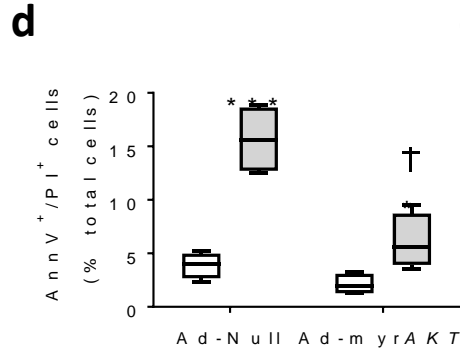
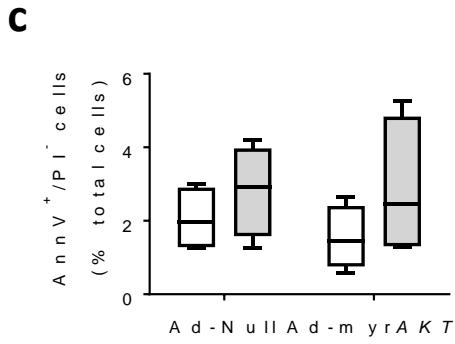
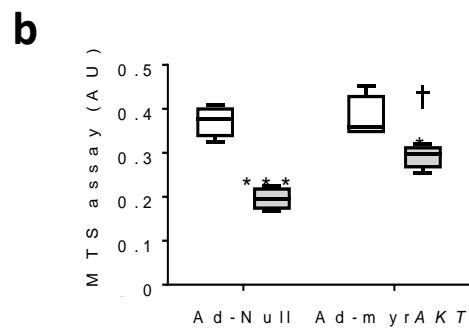
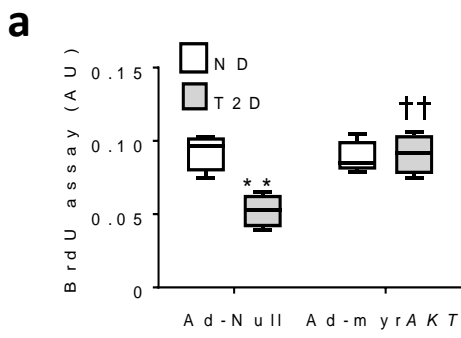


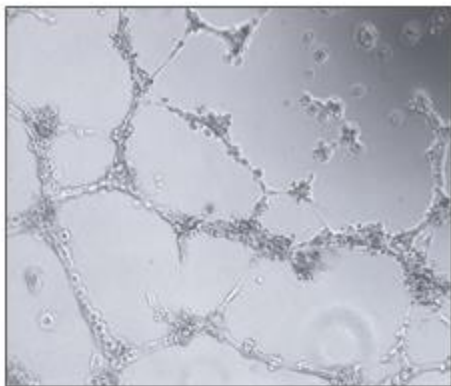
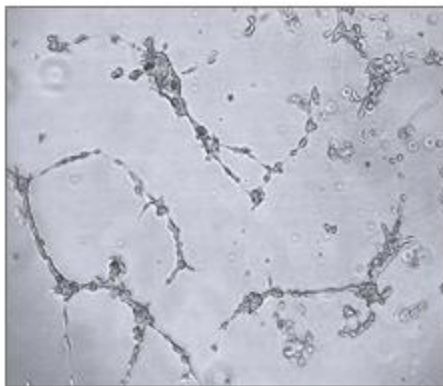
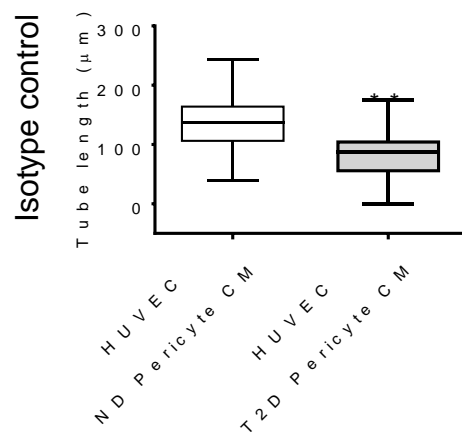
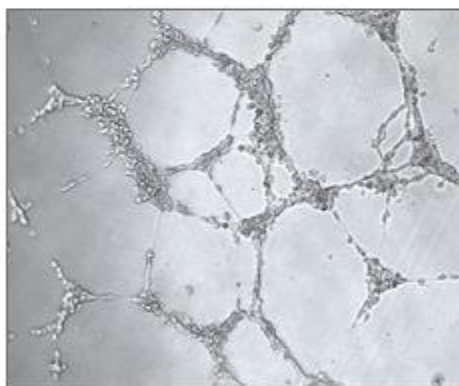
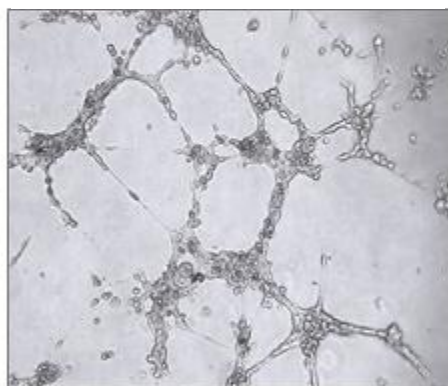
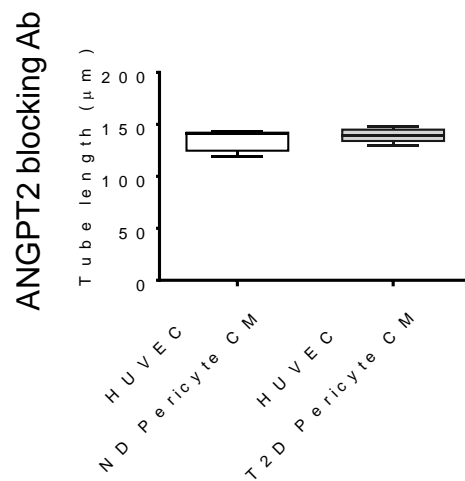
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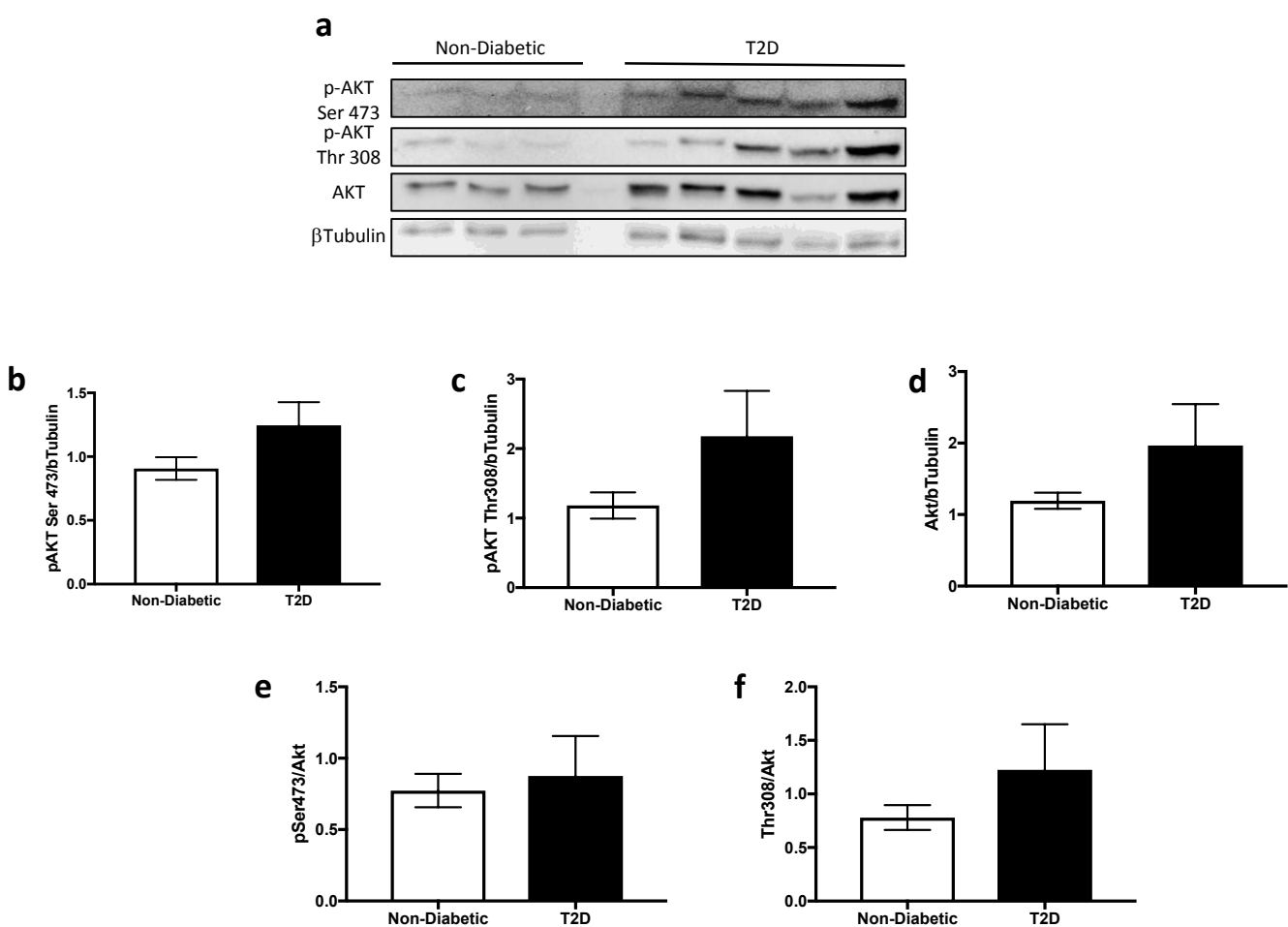






aHUVEC + ND Pericyte CM
Isotype controlHUVEC + T2D Pericyte CM
Isotype control**b****c**HUVEC + ND Pericyte CM
ANGPT2 blocking AbHUVEC + T2D Pericyte CM
ANGPT2 blocking Ab**d**

ESM Fig. 1



Supplementary Figure 1. Western blot analysis of AKT. (a) Blots showing the phosphorylation level of AKT in pericytes isolated from the BM of T2D and nondiabetic patients. Each lane corresponds to an individual cell line. (b-d) Bar graphs showing average results expressed as AKT/tubulin ratio. (e&f) Bar graphs showing average results expressed as pAKT/total AKT ratio. No significant difference was denoted in the comparison. Analysis was performed by Student's t test.